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T-441 P.002/002 F-103

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PATENT DEPARTMENT
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Marlene Capreri	(Depositor's name)
Marlene Capreri	(Signature)
July 19, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/088,340	06/25/2002	Manfred Weidner	C2065 PCT/US	9203

TITLE OF INVENTION: DETERGENT TABLETS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	07/22/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
DOUJON, LORNA M	1751	510-446000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev. 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	<input type="checkbox"/> John F. Daniels <input type="checkbox"/> Daniel S. Ortiz <input type="checkbox"/> 3
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for reexamination as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Cognis Deutschland GmbH & Co. KG

Duesseldorf, Germany

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(b)(2).

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Authorized Signature

Daniel S. Ortiz

Date July 19, 2005

Typed or printed name

Daniel S. Ortiz

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300 BROOKSIDE AVENUE
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TO:
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FROM:
Name: D. Ortiz, Ambler, PA

Fax No.: 215-628-1345

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Attorney's Docket: C 2065

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